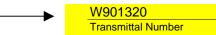
Enter your transmittal number



Your unique Transmittal Number can be accessed online: http://mass.gov/dep/service/online/trasmfrm.shtml or call MassDEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes).

Massachusetts Department of Environmental Protection Transmittal Form for Permit Application and Payment

1. Please type or print. A separate Transmittal Form must be completed for each permit application.	Α.	Permit Information					
		W026546 1. Permit Code: 7 or 8 character code from permit instructions		BWP-IW 39 2. Name of Permit Category			
		Permit Renewal			0 ,		
		3. Type of Project or Activity					
2. Make your							
check payable to the Commonwealth	В.	B. Applicant Information – Firm or Individual					
of Massachusetts	Milford Power, LP						
and mail it with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.		Name of Firm - Or, if party needing this approval is an individual enter name below:					
		5, 1, 1, 1, 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,					
		2. Last Name of Individual			-	4. MI	
		108 National Street					
		5. Street Address					
3. Three copies of this form will be needed.		Milford	MA	01757	508-382-9358		
		6. City/Town	7. State	8. Zip Code	9. Telephone #	10. Ext. #	
		Robert Maggiani		rmaggiani@anp			
Copy 1 - the original must		11. Contact Person		12. e-mail address	(optional)		
accompany your							
permit application.	C.	C. Facility, Site or Individual Requiring Approval					
Copy 2 must accompany your	same as above						
fee payment.		1. Name of Facility, Site Or Individual					
Copy 3 should be							
retained for your records		2. Street Address					
4.5.4.6		3. City/Town	4. State	5. Zip Code	6. Telephone #	7. Ext. #	
4. Both fee-paying and exempt		1201504 (AQ#) {FMF # 204932}	76-032		o. releptions "	7. Ext. 11	
applicants must		8. DEP Facility Number (if Known) 9. Federal I.D. Number (if Known) 10. BWSC Tracking # (
mail a copy of this		, , , , , , , , , , , , , , , , , , ,					
transmittal form to:	D. Application Prepared by (if different from Section B)*						
MassDEP P.O. Box 4062 Boston, MA 02211	ENSR						
		1. Name of Firm Or Individual					
		2 Technology Park Drive					
		2. Address					
		Westford	MA	01886	978-589-3093		
		3. City/Town	4. State	5. Zip Code	6. Telephone #	7. Ext. #	
		James W. Jolley		•	·		
		. Contact Person 9. LSP Number (BWSC Permits only)		VSC Permits only)			
	_	F. Darmit - Drainet Coordination					
	E. Permit - Project Coordination						
	1.	 Is this project subject to MEPA review? ☐ yes ☒ no 					
		If yes, enter the project's EOEA file number - assigned when an					
	Environmental Notification Form is submitted to the MEPA unit:						
	EOEA File Number						
	F. Amount Due						
DEP Use Only	Sp	ecial Provisions:					
	1.						
Permit No:	There are no fee exemptions for BWSC permits, regardless of applicant status.						
	2. 3.	☐ Hardship Request - payment extensions according to 310 CMR 4.04(3)(c). ☐ Alternative Schedule Project (according to 310 CMR 4.05 and 4.10).					
Nec a Date.	3. 4.	☐ Homeowner (according to 310 CMR 4.02).					
Reviewer:	-		605.00		12/5/2007		
			,605.00 lar Amount		12/5/2007 Date		
		555 1 tall 1001	/ IIII O UIII		- 410		

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